

Mr. SCHUMER. I ask unanimous consent that the bill be considered read a third time.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill was ordered to be engrossed for a third reading and was read the third time.

Mr. SCHUMER. I know of no further debate on the bill.

The PRESIDING OFFICER. If there is no further debate, the bill having been read the third time, the question is, Shall the bill pass?

The bill (S. 2794) was passed, as follows:

S. 2794

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Supporting Families of the Fallen Act".

SEC. 2. INCREASE IN AUTOMATIC MAXIMUM COVERAGE UNDER SERVICEMEMBERS' GROUP LIFE INSURANCE AND VETERANS' GROUP LIFE INSURANCE.

(a) IN GENERAL.—Section 1967(a)(3)(A)(i) of title 38, United States Code, is amended by striking "\$400,000" and inserting "\$500,000".

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on the later of—

(1) the date that is 60 days after the date of the enactment of this Act; or

(2) the date on which the Secretary of Veterans Affairs determines that—

(A) the amount for which a member will be insured pursuant to the amendment made by subsection (a) and the premiums for such amount are administratively and actuarially sound for the Servicemembers' Group Life Insurance program under subchapter III of chapter 19 of title 38, United States Code, and the Veterans' Group Life Insurance program under section 1977 of such title; and

(B) the increase in such amount carried out pursuant to the amendment will not result in such programs operating at a loss.

Mr. SCHUMER. I further ask unanimous consent that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

MAKING ADVANCES IN MAMMOGRAPHY AND MEDICAL OPTIONS FOR VETERANS ACT

Mr. SCHUMER. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 303, S. 2533.

The PRESIDING OFFICER. The clerk will report the bill by title.

The senior assistant legislative clerk read as follows:

A bill (S. 2533) to improve mammography services furnished by the Department of Veterans Affairs, and for other purposes.

There being no objection, the Senate proceeded to consider the bill, which had been reported from the Committee on Veterans' Affairs, with an amendment to strike all after the enacting clause and insert in lieu thereof the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Making Advances in Mammography and Medical Options for Veterans Act".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—SCREENING AND EARLY DETECTION

Sec. 101. Strategic plan for breast imaging services for veterans.

Sec. 102. Telescreening mammography pilot program of Department of Veterans Affairs.

Sec. 103. Upgrade of breast imaging at facilities of Department of Veterans Affairs to three-dimensional digital mammography.

Sec. 104. Study on availability of testing for breast cancer gene among veterans and expansion of availability of such testing.

Sec. 105. Mammography accessibility for paralyzed and disabled veterans.

Sec. 106. Report on access to and quality of mammography screenings furnished by Department of Veterans Affairs.

TITLE II—PARTNERSHIPS FOR RESEARCH AND ACCESS TO CARE

Sec. 201. Partnerships with National Cancer Institute to expand access of veterans to cancer care.

Sec. 202. Report by Department of Veterans Affairs and Department of Defense on interagency collaboration on treating and researching breast cancer.

TITLE I—SCREENING AND EARLY DETECTION

SEC. 101. STRATEGIC PLAN FOR BREAST IMAGING SERVICES FOR VETERANS.

(a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a strategic plan for improving breast imaging services for veterans.

(b) ELEMENTS.—The strategic plan required by subsection (a) shall—

(1) cover the evolving needs of women veterans;

(2) address geographic disparities of breast imaging furnished at a facility of the Department of Veterans Affairs and the use of breast imaging through non-Department providers in the community;

(3) address the use of digital breast tomosynthesis (DBT-3D breast imaging);

(4) address the needs of male veterans who require breast cancer screening services; and

(5) provide recommendations on—

(A) potential expansion of breast imaging services furnished at facilities of the Department, including infrastructure and staffing needs;

(B) the use of digital breast tomosynthesis;

(C) the use of mobile mammography; and

(D) other access and equity improvements for breast imaging.

SEC. 102. TELESCREENING MAMMOGRAPHY PILOT PROGRAM OF DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Commencing not later than 18 months after the date of the enactment of this Act, the Secretary of Veterans Affairs shall carry out a pilot program to provide telescreening mammography services for veterans who live in—

(1) States where the Department of Veterans Affairs does not offer breast imaging services at a facility of the Department; or

(2) locations where access to breast imaging services at a facility of the Department is difficult or not feasible, as determined by the Secretary.

(b) DURATION.—The Secretary shall carry out the pilot program under subsection (a) for a three-year period beginning on the commencement of the pilot program.

(c) LOCATIONS.—In carrying out the pilot program under subsection (a), the Secretary may use community-based outpatient clinics, mobile mammography, Federally qualified health centers (as defined in section 1861(aa)(4) of the Social Security Act (42 U.S.C. 1395x(aa)(4))), rural health clinics, critical access hospitals, clinics of the Indian Health Service, and such other sites as the Secretary determines feasible to provide mammograms under the pilot program.

(d) SHARING OF IMAGES AND RESULTS.—Under the pilot program under subsection (a)—

(1) mammography images generated shall be sent to a telescreening mammography center of the Department for interpretation by qualified radiologists; and

(2) results shall be shared with the veteran and their primary care provider in accordance with policies established by the Secretary.

(e) REPORT.—

(1) IN GENERAL.—Not later than one year after the conclusion of the pilot program under subsection (a), the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report evaluating the pilot program.

(2) ELEMENTS.—The report required by paragraph (1) shall include the following:

(A) An assessment of the quality of the mammography provided under the pilot program under subsection (a).

(B) Feedback from veterans and providers participating in the pilot program.

(C) A recommendation of the Secretary on the continuation or discontinuation of the pilot program.

SEC. 103. UPGRADE OF BREAST IMAGING AT FACILITIES OF DEPARTMENT OF VETERANS AFFAIRS TO THREE-DIMENSIONAL DIGITAL MAMMOGRAPHY.

Not later than two years after the date of the enactment of this Act, the Secretary of Veterans Affairs shall—

(1) upgrade all mammography services at facilities of the Department of Veterans Affairs that provide such services to use digital breast tomosynthesis technology, also known as three-dimensional breast imaging; and

(2) submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report—

(A) indicating that the upgrade under paragraph (1) has been completed; and

(B) listing the facilities or other locations of the Department at which digital breast tomosynthesis technology is used.

SEC. 104. STUDY ON AVAILABILITY OF TESTING FOR BREAST CANCER GENE AMONG VETERANS AND EXPANSION OF AVAILABILITY OF SUCH TESTING.

(a) STUDY.—

(1) IN GENERAL.—The Secretary of Veterans Affairs shall conduct a study on the availability of access to testing for the breast cancer gene for veterans diagnosed with breast cancer, as recommended by the guidelines set forth by the National Comprehensive Cancer Network.

(2) ELEMENTS.—In conducting the study under paragraph (1), the Secretary shall examine—

(A) the feasibility of expanding the Joint Medicine Service of the Department of Veterans Affairs to provide genetic testing and counseling for veterans with breast cancer across the country; and

(B) access to such testing and counseling for veterans living in rural or highly rural areas, and any gaps that may exist with respect to such access.

(b) EXPANSION OF AVAILABILITY OF TESTING.—

(1) IN GENERAL.—The Secretary shall update guidelines or institute new guidelines to increase the use of molecular testing and genetic counseling for veterans diagnosed with breast cancer, including veterans living in rural or highly rural areas.

(2) **DECISION SUPPORT TOOLS.**—In updating or instituting guidelines under paragraph (1), the Secretary may develop clinical decision support tools, such as clinical pathways, to facilitate delivery of breast cancer care that is in line with national cancer guidelines.

(c) **REPORT.**—Not later than two years after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on—

(1) the results of the study under subsection (a);

(2) any updates to guidelines or new guidelines instituted under subsection (b);

(3) breast cancer clinical pathways implemented by the Department of Veterans Affairs and the utilization of those pathways across the Department; and

(4) any progress of the Department in improving access to and usage of molecular and genetic testing among veterans diagnosed with breast cancer, including for veterans living in rural or highly rural areas.

(d) **DEFINITIONS.**—In this section, the terms “rural” and “highly rural” have the meanings given those terms in the Rural-Urban Commuting Areas coding system of the Department of Agriculture.

SEC. 105. MAMMOGRAPHY ACCESSIBILITY FOR PARALYZED AND DISABLED VETERANS.

(a) **STUDY.**—

(1) **IN GENERAL.**—The Secretary of Veterans Affairs shall conduct a study on the accessibility of breast imaging services at facilities of the Department of Veterans Affairs for veterans with paralysis, spinal cord injury or disorder (SCI/D), or another disability.

(2) **ACCESSIBILITY.**—The study required by paragraph (1) shall include an assessment of the accessibility of the physical infrastructure at breast imaging facilities of the Department, including the imaging equipment, transfer assistance, and the room in which services will be provided as well as adherence to best practices for screening and treating veterans with a spinal cord injury or disorder.

(3) **SCREENING RATES.**—

(A) **MEASUREMENT.**—The study required by paragraph (1) shall include a measurement of breast cancer screening rates for veterans with a spinal cord injury or disorder during the two-year period preceding the commencement of the study, including a breakout of the screening rates for such veterans living in rural or highly rural areas.

(B) **DEVELOPMENT OF METHOD.**—If the Secretary is unable to provide the measurement required under subparagraph (A), the Secretary shall develop a method to track breast cancer screening rates for veterans with a spinal cord injury or disorder.

(4) **REPORT.**—Not later than two years after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on the findings of the study required by paragraph (1), including—

(A) the rates of screening among veterans with a spinal cord injury or disorder, including veterans living in rural or highly rural areas, as required under paragraph (3)(A); or

(B) if such rates are not available, a description of the method developed to measure such rates as required under paragraph (3)(B).

(b) **CARE FROM NON-DEPARTMENT PROVIDERS.**—The Secretary shall update the policies and directives of the Department to ensure that, in referring a veteran with a spinal cord injury or disorder for care from a non-Department provider, the Secretary shall—

(1) confirm with the provider the accessibility of the breast imaging site, including the imaging equipment, transfer assistance, and the room in which services will be provided; and

(2) provide additional information to the provider on best practices for screening and treating veterans with a spinal cord injury or disorder.

(c) **DEFINITIONS.**—In this section, the terms “rural” and “highly rural” have the meanings given those terms in the Rural-Urban Commuting Areas coding system of the Department of Agriculture.

SEC. 106. REPORT ON ACCESS TO AND QUALITY OF MAMMOGRAPHY SCREENINGS FURNISHED BY DEPARTMENT OF VETERANS AFFAIRS.

(a) **IN GENERAL.**—Not later than two years after the date of the enactment of this Act, the Inspector General of the Department of Veterans Affairs shall submit to the Secretary of Veterans Affairs, the Committee on Veterans' Affairs of the Senate, and the Committee on Veterans' Affairs of the House of Representatives a report on mammography services furnished by the Department of Veterans Affairs.

(b) **ELEMENTS.**—The report required by subsection (a) shall include an assessment of—

(1) the access of veterans to mammography screenings, whether at a facility of the Department or through a non-Department provider, including any staffing concerns of the Department in providing such screenings;

(2) the quality of such screenings and reading of the images from such screenings, including whether such screenings use three-dimensional mammography;

(3) the communication of the results of such screenings, including whether results are shared in a timely manner, whether results are shared via the Joint Health Information Exchange or another electronic mechanism, and whether results are incorporated into the electronic health record of the veteran;

(4) the performance of the Women's Breast Oncology System of Excellence of the Department; and

(5) the access of veterans diagnosed with breast cancer to a comprehensive breast cancer care team of the Department.

(c) **FOLLOW-UP.**—Not later than 180 days after the submittal of the report under subsection (a), the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a plan to address the deficiencies identified in the report under subsection (a), if any.

TITLE II—PARTNERSHIPS FOR RESEARCH AND ACCESS TO CARE

SEC. 201. PARTNERSHIPS WITH NATIONAL CANCER INSTITUTE TO EXPAND ACCESS OF VETERANS TO CANCER CARE.

(a) **ACCESS TO CARE IN EACH VISN.**—

(1) **IN GENERAL.**—The Secretary of Veterans Affairs shall enter into a partnership with not fewer than one cancer center of the National Cancer Institute of the National Institutes of Health in each Veterans Integrated Service Network of the Department of Veterans Affairs to expand access to high-quality cancer care for women veterans.

(2) **TREATMENT OF RURAL VETERANS.**—The Secretary, in carrying out partnerships entered into under paragraph (1), shall ensure that veterans with breast cancer who reside in rural areas or States without a cancer center that has entered into such a partnership with the Secretary are able to receive care through such a partnership via telehealth.

(b) **REPORT ON PARTNERSHIP TO INCREASE ACCESS TO CLINICAL TRIALS.**—Not later than 180 days after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on—

(1) how the Secretary will ensure that the advancements made through the existing partnership between the Department of Veterans Affairs and the National Cancer Institute to pro-

vide veterans with access to clinical cancer research trials (commonly referred to as “NAVIGATE”) are permanently implemented; and

(2) the determination of the Secretary of whether expansion of such partnership to more than the original 12 facilities of the Department that were selected under such partnership is feasible.

(c) **PERIODIC REPORTS.**—Not later than three years after the date of the enactment of this Act, and every three years thereafter, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report—

(1) assessing how the partnerships entered into under subsection (a)(1) have impacted access by veterans to cancer centers of the National Cancer Institute, including an assessment of the telehealth options made available and used pursuant to such partnerships; and

(2) describing the advancements made with respect to access by veterans to clinical cancer research trials through the partnership described in subsection (b)(1), including how many of those veterans were women veterans, minority veterans (including racial and ethnic minorities), and rural veterans, and identifying opportunities for further innovation.

SEC. 202. REPORT BY DEPARTMENT OF VETERANS AFFAIRS AND DEPARTMENT OF DEFENSE ON INTERAGENCY COLLABORATION ON TREATING AND RESEARCHING BREAST CANCER.

(a) **IN GENERAL.**—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs, in collaboration with the Secretary of Defense, shall submit to Congress a report on all current research and health care collaborations between the Department of Veterans Affairs and the Department of Defense on treating veterans and members of the Armed Forces with breast cancer.

(b) **ELEMENTS.**—The report required by subsection (a)—

(1) shall include a description of potential opportunities for future interagency collaboration between the Department of Veterans Affairs and the Department of Defense with respect to treating and researching breast cancer; and

(2) may include a focus on—

(A) with respect to women members of the Armed Forces with a diagnosis of or who are undergoing screening for breast cancer, transition of such members from receiving care from the Department of Defense to receiving care from the Department of Veterans Affairs;

(B) collaborative breast cancer research opportunities between the Department of Veterans Affairs and the Department of Defense;

(C) access to clinical trials; and

(D) such other matters as the Secretary of Veterans Affairs and the Secretary of Defense consider appropriate.

Mr. SCHUMER. I ask unanimous consent that the committee-reported substitute amendment be agreed to and that the bill be considered read a third time.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee-reported amendment in the nature of a substitute was agreed to.

The bill was ordered to be engrossed for a third reading and was read the third time.

Mr. SCHUMER. I know of no further debate on the bill, as amended.

The PRESIDING OFFICER. If there is no further debate on the bill, the bill having been read the third time, the question is, Shall the bill pass?

The bill (S. 2533), as amended, was passed.

Mr. SCHUMER. I further ask unanimous consent that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. SCHUMER. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. SCHUMER. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

ORDERS FOR THURSDAY, MARCH
24, 2022

Mr. SCHUMER. First, I would like to say school is good for young pages.

Second, Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 10 a.m. tomorrow on Thursday, March 24; and that following the prayer and the pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the

time for the two leaders be reserved for their use later in the day, and morning business be closed; that upon the conclusion of morning business, the Senate resume consideration of Calendar No. 280, H.R. 4521, America COMPETES Act; further, that at 11:30 a.m., the Senate vote on confirmation of the Luger nomination, as provided under the previous order; finally, that if any nominations are confirmed during Thursday's session of the Senate, the motion to reconsider be considered made and laid upon the table and the President be immediately notified of the Senate's action.

The PRESIDING OFFICER. Without objection, it is so ordered.

ADJOURNMENT UNTIL 10 A.M.
TOMORROW

Mr. SCHUMER. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order.

There being no objection, the Senate, at 9:51 p.m., adjourned until Thursday, March 24, 2022, at 10 a.m.

CONFIRMATIONS

Executive nominations confirmed by the Senate March 23, 2022:

THE JUDICIARY

ALISON J. NATHAN, OF NEW YORK, TO BE UNITED STATES CIRCUIT JUDGE FOR THE SECOND CIRCUIT.

JOHN H. CHUN, OF WASHINGTON, TO BE UNITED STATES DISTRICT JUDGE FOR THE WESTERN DISTRICT OF WASHINGTON.

JULIE REBECCA RUBIN, OF MARYLAND, TO BE UNITED STATES DISTRICT JUDGE FOR THE DISTRICT OF MARYLAND.

CRISTINA D. SILVA, OF NEVADA, TO BE UNITED STATES DISTRICT JUDGE FOR THE DISTRICT OF NEVADA.

ANNE RACHEL TRAUM, OF NEVADA, TO BE UNITED STATES DISTRICT JUDGE FOR THE DISTRICT OF NEVADA.

CORPORATION FOR NATIONAL AND COMMUNITY
SERVICE

ALVIN HARLYN WARREN, OF NEW MEXICO, TO BE A MEMBER OF THE BOARD OF DIRECTORS OF THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE FOR A TERM EXPIRING OCTOBER 6, 2023.

NATIONAL FOUNDATION ON THE ARTS AND THE
HUMANITIES

FIONA WHELAN PRINE, OF TENNESSEE, TO BE A MEMBER OF THE NATIONAL COUNCIL ON THE ARTS FOR A TERM EXPIRING SEPTEMBER 3, 2024.

BEVERLY GAGE, OF CONNECTICUT, TO BE A MEMBER OF THE NATIONAL COUNCIL ON THE HUMANITIES FOR A TERM EXPIRING JANUARY 26, 2024.

THE JUDICIARY

HECTOR GONZALEZ, OF NEW YORK, TO BE UNITED STATES DISTRICT JUDGE FOR THE EASTERN DISTRICT OF NEW YORK.